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10/10/2007

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

MAR 2 7 2008 PH

MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT.

IN FORMA PAUPERIS APPLICATION

2008

				AND	MADA
۸۵۷	المحداد	GRITZ	FINANCI	AL AFFIDAVIT	MAR 27
<u>,#=1}\1=</u>	Plainti	ff .			
	v.				-2°
Me	i. Ter	3 Grobell Chire In	CASE NUMBE	ROSC 14410	
. Vi	Defe	ndant(s)	์ JUDGE <u> 13⊰∟</u>	ichlo	<u> </u>
more to provid I, A (other withou declar the co	nformation to the addition of	ncluded, please place an X into whichever be not than the space that is provided, attach one internal information. Please PRINT:	or more pages that re are that I am the This affidavit const motion for appoin eedings, and that I	efer to each such question ■plaintiff □petitione titutes my application □ tment of counsel, or ■ am entitled to the relie	number and Tomovant I to proceed both. I also of sought in
1.	I.D.#_	ou currently incarcerated?	son or jail:	(If "No," go to Questi	on 2)
2.	Month Name	ou currently employed? About Siyes ly salary or wages: 400 000 000 000 000 000 000 000 000 00	dines less	፞ ፟ቜ፟፟ኯቜ፟ኯ <i>፞ጞጞ፞፞ዹ</i> ቘ	Harson
	a.	If the answer is "No": Date of last employment: Monthly salary or wages:	<i>-</i>		
	•	Name and address of last employer:	•		
	ь.	Are you married? Spouse's monthly salary or wages: Name and address of employer:			·
3.	or any	from your income stated above in respondence residence r	eceived more than	n the past twelve month n \$200 from any of the	following
	a.	Salary or wages		□Yes	⊠ No
	A		L		

b. Amou	☐ Business, ☐ profession or ☐ other self-employment unt Received by	□Yes	⊠No
c. Amou	Name Rent payments, ☐ interest or ☐ dividends and ☐ 1 or ☐ ☐ Interest or ☐ dividends	RITZ	574000¥ □Nº
d.	☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurated compensation, ☐ unemployment, ☐ welfare, ☐ alimony or necessary.	nce, □ disability, naintenance or □ c	□ worker hild suppo
Amou	untReceived by	□Yes	
e. Amou	☐ Gifts or ☐ inheritances unt Received by	□Yes	I∑ No
f. Amou	□Any other sources (state source:) □Yes	15% No
savir	you or anyone else living at the same residence have more that ngs accounts? Total Yes No Total Relationship to you	al amount:	· · · · ·
finar	you or anyone else living at the same residence own any storical instruments? perty: Current Value: hose name held: Relationship to you	ΠVec	KINA
Do y cond Addi Type In wi	you or anyone else living at the same residence own any re dominiums, cooperatives, two-flats, three-flats, etc.)? ress of property: cof property: Current value: Current	al estate (houses, TYes THEYTHAN TO THE STORY	apartment □No
home Prop Curre	ou or anyone else living at the same residence own any autories or other items of personal property with a current market value:	lue of more than \$ SXYes	lers, mobil 1000? ∐No
List t	the persons who are dependent on you for support, state your reate how much you contribute monthly to their support. If none	elationship to each	dependent

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Filed 03/27/2008

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE

(Incarcerated applicants only) (To be completed by the institution of incarceration)

I certify that the applicant named herein,	, I.D.#, has the sur	n o
\$ on account to his/her	credit at (name of institution)	
I further certify that the applicant has the	following securities to his/her credit: I fur	he
certify that during the past six months t	he applicant's average monthly deposit was \$	
(Add all deposits from all sources and the	en <u>divide</u> by number of months).	
DATE	SIGNATURE OF AUTHORIZED OFFICER.	
	(Print name)	

rev. 10/10/2007